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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 09/754,066 01/05/2001 PAT 6,699,985
 which is a CON of 08/848,013 04/28/1997 ABN
 which is a CIP of 08/185,416 01/24/1994 PAT 5,624,912
 which is a CIP of 08/002,395 01/13/1993 ABN
 which is a CIP of 07/748,277 08/21/1991 ABN
 and is a CIP of 07/830,886 02/04/1992 ABN
 which is a CIP of 07/815,130 12/27/1991 ABN

** FOREIGN APPLICATIONS *****

UNITED STATES OF AMERICA PCT/US94/00638 01/13/1994

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials	PA	6	1	1

ADDRESS

22907
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TITLE

Method of treating HIV infection and related secondary infections thereof

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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